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**TRANSMITTAL  
FORM**

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Total Number of Pages in This Submission

Application Number

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First Named Inventor

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Art Unit

3731

Examiner Name

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Attorney Docket Number

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**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Workman Nydegger		
Signature	/Fraser D. Roy, Reg.# 45666/		
Printed name	Fraser D. Roy		
Date	March 2, 2007	Reg. No.	45,666

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Alexandra Lauren	Date	March 2, 2007

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